

York County Route 17 Property Improvement Program Grant Application

Applicant (owner consent form required if you are a tenant)

Business: _____

Business address: _____

Contact person: _____

Phone: _____ Email: _____

Property Owner: _____

Property Owner Home Address: _____

Phone: _____

Contractor if applicable

Contractor Name: _____

Address: _____

Phone: _____

Design Professional if applicable

Design Professional Name: _____

Address: _____

Phone: _____

Project Cost

Estimated Cost of Improvements: _____

Amount of Grant Funds Requested: _____

Please attach to this application:

- Written summary of the proposed work;
- Photographs clearly showing existing conditions to be improved upon;
- Design plan for applicable improvement(s);
- Exact samples of any paint or colors to be used

**York County Route 17 Property Improvement Grant Program
Owner's Consent Form**

(To be completed if applicant is tenant)

I, _____, certify that I own the property

located at _____ in York County,
Virginia,

and that I have reviewed the application for the York County Route 17 Property

Improvement Grant Program submitted by _____

and that I fully support this application. I further certify that this person or business holds

a valid lease of _____ years with an expiration date of _____.

Signature

Print Name

Mailing Address

Phone